

Georgia

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State CARE Act Program Profile

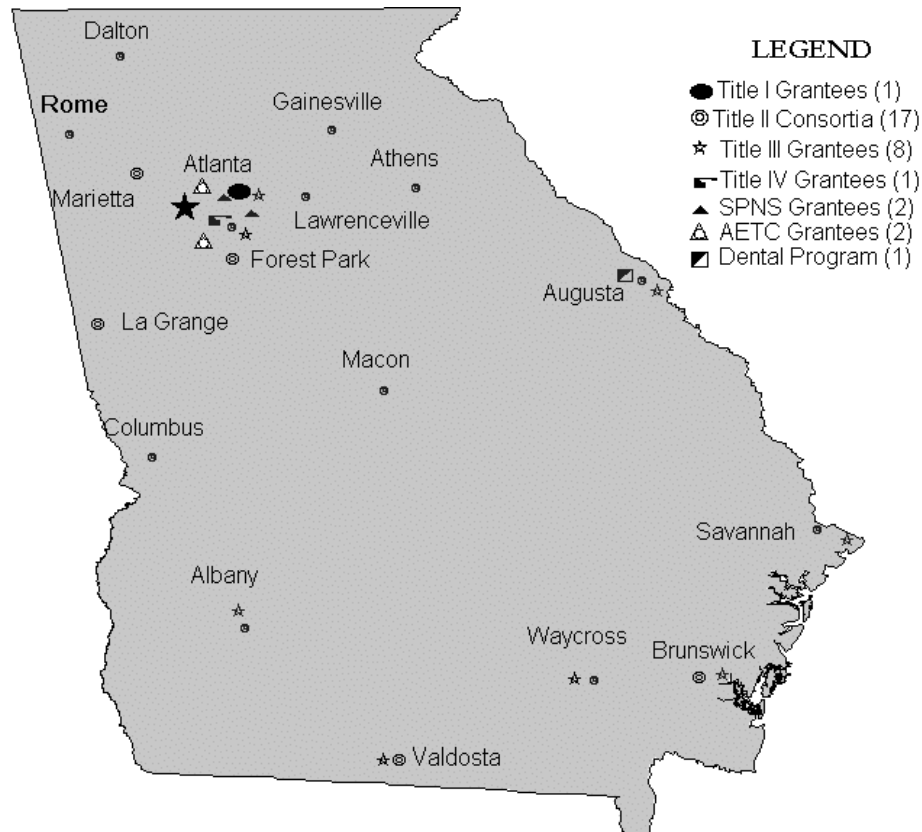
CARE Act Funding History Since 1996

Fiscal Year	1996	1997	1998	Total
Title I	\$9,208,182	\$12,632,117	\$12,021,454	\$33,861,753
Title II (including ADAP)	\$7,394,151	\$12,340,139	\$16,211,799	\$35,946,089
ADAP	(\$1,515,721)	(\$5,125,509)	(\$8,818,043)	(\$15,459,273)
Title III	\$2,372,254	\$2,797,122	\$2,980,472	\$8,149,848
Title IV	\$513,940	\$520,940	\$537,000	\$1,571,880
SPNS	\$528,155	\$835,439	\$983,392	\$2,346,986
AETC	\$487,679	\$622,737	\$652,369	\$1,762,785
Dental	\$27,993	\$37,220	\$48,058	\$113,271
Total	\$20,532,354	\$29,785,714	\$33,434,544	\$83,752,612

Number of CARE Act-funded Grantees in State (in addition to Title II and ADAP grants)

	1996	1997	1998
Title I	1	1	1
Title III	6	7	8
Title IV	1	1	1
SPNS	2	2	2
AETC (grantee or subcontractor)	2	2	2
Dental	1	1	1

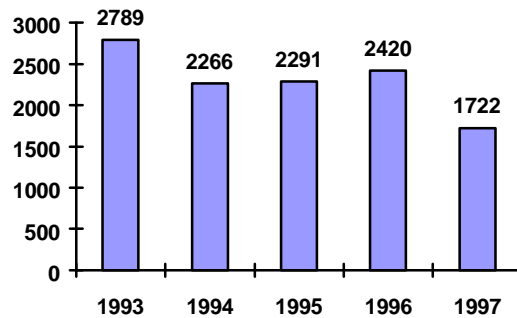
Location of FY 1998 CARE Act Grantees and Title II Consortia



HIV/AIDS Epidemic in the State: Georgia (Pop. 7,486,242)

- ▶ Persons reported to be living with AIDS through 1997: 8,144
- ▶ New AIDS Cases by Calendar Year, 1993-1997

- ▶ State reporting requirement for HIV:
No HIV reporting
- ▶ State AIDS Cases (cumulative) since 1993: 11,488 (3% of AIDS cases in the U.S.)



Demographics of AIDS Cases Reported in 1997

	State-Specific Data	National Data
Men (13 years and up):	79%	78%
Women (13 years and up):	21%	22%

	State-Specific Data	National Data
<13 years old :	0%	1%
13-19 years old :	1%	1%
20+ years old :	99%	98%

	State-Specific Data	National Data
White:	25%	33%
African American:	72%	45%
Hispanic:	3%	21%
Asian/Pacific Islander:	0%	<1%
Native American/Alaskan Native:	0%	<1%

	State-Specific Data	National Data
Men who have sex with men (MSM):	38%	35%
Injecting drug user (IDU):	18%	24%
Men who have sex with men and inject drugs (MSM/IDU):	4%	4%
Heterosexual contact:	17%	13%
Other, unknown or not reported:	22%	24%

Pediatric Cases, by exposure category

	State-Specific Data	National Data
Hemophilia/coagulation disorder:	0%	<1%
Mother with/at risk for HIV infection:	50%	91%
Receipt of blood transfusion, blood components, or tissue:	0%	<1%
Other, unknown or not reported:	50%	8%

Co-morbidities

	State Cases per 100,000 Population	U.S. Cases per 100,000 Population
Chlamydia (1996)	188.2	194.5
Gonorrhea (1996)	275.1	124.0
Syphilis (1996)	9.6	4.3
TB (1997)	9.3	7.4

Statewide Coordinated Statement of Need (SCSN)

To enhance collaboration in HIV needs assessment and planning activities among CARE Act grantees and to maximize CARE Act resources statewide, Title II grantees were required to develop, in collaboration with other CARE Act grantees, an SCSN by March 1998. SCSNs must include: a discussion of existing needs assessments; epidemiologic data; discussion of emerging issues in HIV care in the state; critical gaps in HIV medical and support services; and broad goals to address major service gaps.

- ▶ **Gaps:** mental health, substance abuse, and homeless services; financial counseling/assistance; needle exchange; changing demand for case management; providers experienced with populations affected by HIV; and services that address co-morbidities
- ▶ **Emerging Needs:** services for women, adolescents, migrant workers, incarcerated, homeless, sex workers, and the aging; long-term care needs; standardized data collection; and managed care

State Medicaid Information

In 1998, Medicaid is estimated to have covered 55% of U.S. adults with AIDS and 90% of pediatric AIDS cases. Applying these percentages to the number of AIDS cases in the U.S., at least 108,000 individuals with AIDS were covered by Medicaid in 1998.

Medicaid Income Eligibility Requirements

Eligibility Category	Income
Adult Aged/Blind/Disabled*	75% FPL
Pregnant Women	200% FPL
Medically Needy	35% FPL

*Income eligibility for State's ADAP program is 125% FPL.

Medicaid Prescription Drug Benefits Limits

Co-payment:	No
Limit on Rx per month:	Yes
Refill limit:	No
Quantity Limit:	Yes

Waivers

1115

Section 1115 of the Social Security Act gives the Secretary of Health and Human Services broad authority to waive provisions in Title XIX, the Medicaid statute. Populations covered vary from waiver to waiver, as does the scope of coverage and the nature of the provider organization.

1115 waiver: No

1915(b)

Section 1915(b) of the Social Security Act authorizes the Secretary of Health and Human Services to waive compliance with certain portions of the Medicaid statute that prevent a state from mandating that Medicaid beneficiaries obtain their care from a single provider or health plans.

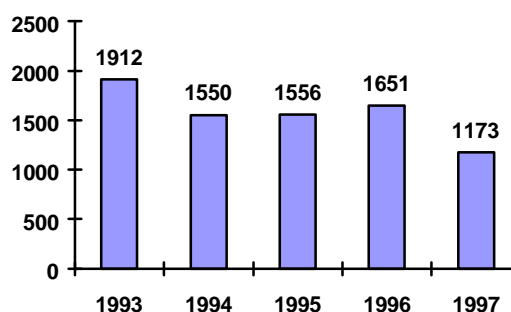
1915(b) waiver(s): Yes

Title I: Atlanta (Pop. 1,600,000)

Title I funds are provided to eligible metropolitan areas (EMAs) hardest hit by the HIV/AIDS epidemic to provide a wide range of community-based services. In FY 1998, there were 49 EMAs in 19 States, Puerto Rico and the District of Columbia. From FY 1991 to FY 1998, more than \$2.4 billion in funding was appropriated for Title I programs in the U.S.

► New AIDS cases by calendar year, 1993-1997

- EMA: Barrow, Bartow, Carroll, Cherokee, Clayton, Cobb, Coweta, Dekalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Newton, Paulding, Pickens, Roccade, Spalding, Walton Counties
- Estimated number of people living with AIDS at the end of 1997: 6,119
- AIDS Cases (cumulative) since 1993: 7,842 (68% of state cases, 2% of total U.S. cases)



AIDS Cases Reported in 1997

	EMA-Specific Data	State-Specific Data	National Data
Men (13 years and up):	82%	79%	78%
Women (13 years and up):	18%	21%	22%

	EMA-Specific Data	State-Specific Data	National Data
<20 years old:	1%	1%	2%
20+ years old:	99%	99%	98%

	EMA-Specific Data	State-Specific Data	National Data
White:	25%	25%	33%
African American:	72%	72%	45%
Hispanic:	3%	3%	21%
Asian/Pacific Islander:	0%	0%	<1%
Native American/Alaskan Native:	0%	0%	<1%

	EMA-Specific Data	State-Specific Data	National Data
Men who have sex with men (MSM):	42%	38%	35%
Injecting drug user (IDU):	21%	18%	24%
Men who have sex with men and inject drugs (MSM/IDU):	5%	4%	4%
Heterosexual contact:	15%	17%	13%
Other, unknown or not reported: (Adults only)	17%	22%	24%

Funding History

Fiscal Year	1996	1997	1998	Total
Formula	\$5,105,049	\$6,313,823	\$6,559,599	\$17,978,471
Supplemental	\$4,103,133	\$6,318,294	\$5,461,855	\$15,883,282
Total	\$9,208,182	\$12,632,117	\$12,021,454	\$33,861,753

Allocation of Funds

	1998
Health Care Services	\$6,692,790/56%
Medications	\$3,022,648/25%
Case Management	\$868,085/7%
Support Services	\$825,135/7%
Administration, Planning and Program Support	\$601,073/5%

Planning Activities

Planning councils work in partnership with the grantee to assess service needs in the EMA and develop a continuum of care. Planning council membership must be reflective of the local epidemic and at least 25 percent of voting members must be PLWH.

- ▶ Number of members on planning council: 45
- ▶ PLWH on planning council: 19 (42%)

Gender of Planning Council Members

Men:	58%
Women:	42%

Race/Ethnicity of Planning Council Members

White:	42%
African American:	49%
Hispanic:	4%
Asian/Pacific Islander:	4%
Native American/Alaska Native:	0%

(Note: Information taken from FY 1998 Applications. Current Planning Council composition may differ.)

Accomplishments

Clients Served (duplicated count), FY 1996:	12,560
Men:	77%
Women:	23%

<13 years old:	7%
13-19 years old:	1%
20+ years old:	92%

White:	29%
African American:	68%
Hispanic:	2%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%
Other, unknown or not reported:	1%

Men who have sex with men (MSM):	51%
Injecting drug user (IDU):	13%
Men who have sex with men and inject drugs (MSM/IDU):	4%
Heterosexual contact:	25%
Other, unknown or not reported:	7%

► Improved Patient Access

- In FY 1997, a total of 6,565 unduplicated PLWH clients received Title I-funded primary medical care, representing an increase of 7.3% over the number of clients served in FY 1996. Of these, 2,625 (40%) clients received antiviral combination therapy that included protease inhibitors funded in part through the Title I program.
- Among the primary care clients, 880 (13%) persons received a total of 12,354 units of substance abuse treatment services funded by Title I in FY 1997. This represented an 81% increase over the previous year in the amount of treatment services provided. That same year, the EMA provided 10,816 units of mental health services, a 25% increase over FY 1996.

- During FY 1995 and FY 1996, Title I-funded dental care services operated almost at full capacity, with little growth in the amount of services provided despite an overall increase of 14% in the total aggregate number of clients served by outpatient health care providers. To address this growing need, a Dental Provider Task Force was formed in FY 1997 and funds were used to establish new dental services at two existing primary care clinics. As a result, 1,427 clients received a total of 6,956 units of dental care services in FY 1997, a 33% increase over FY 1996.

▶ **Improved Patient Outcomes**

- The grantee reports that as a result of increased access to new, combination therapies, many of these clients experienced quality of life improvements, including many whom returned to work.

▶ **Other Accomplishments**

- In FY 1997, a primary care provider developed a pro-active protocol for medication compliance and adherence that was shared with all other providers. The protocol focuses on clients with prior histories of non-adherence.
- The Planning Council added the Title IV Coordinating Committee as a standing committee in FY 1998, to enhance on-going, joint planning and service delivery initiatives aimed at reducing the rate of perinatal transmission and broadening access for women and children to clinical trials.
- A Mental Health Task Force was established in FY 1998 to provide program planning and funding recommendations to the Title I Planning Council.

Title II: Georgia

Title II funds are provided to States and Territories to improve the quality, availability and organization of health care and support services for PLWH. From FY 1991 to FY 1998, more than \$1.9 billion in funding was appropriated for Title II programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Title II Formula Grant	\$7,394,151	\$12,340,139	\$16,211,799	\$35,946,089
ADAP (included in Title II grant)	(\$1,515,721)	(\$5,125,509)	(\$8,818,043)	(\$15,459,273)
Minimum Required State Match	\$3,697,076	\$6,170,070	\$8,105,900	\$17,973,046

Allocation of Funds

	1998
Health Care (State Administered)	\$12,165,715/75%
Home and Community Care	(\$70,000)
Health Insurance Continuation	(\$705,000)
ADAP/Treatments	(\$11,390,715)
Direct Services	(\$0)
Case Management (State Administered)	\$0/0%
Consortia	\$3,222,325/20%
Health Care*	(\$1,758,054)
ADAP/Treatment	(\$390,803)
Case Management	(\$790,138)
Support Services**	(\$283,330)
Administration, Planning and Evaluation (Total State/Consortia)	\$823,759/5%

* includes: diagnostic testing, preventive care and screening, prescribing and managing medication therapy, continuing care and management of chronic conditions, and referral to specialty care.

** includes: counseling, direct emergency financial assistance, companion/buddy services, day and respite care, housing assistance, and food services.

Consortia Activities, FY 1997

States provide services directly or through subcontracts with Title II HIV care consortia. A consortium is an association of public and nonprofit health care and support service providers and community-based organizations that plans, develops and delivers services for people living with HIV disease.

Number of consortia in State: 17

Consortium Name	Location	Title II Funding, FY 1997
Clayton County Consortium	Forest Park	\$95,172
Coastal HIV Care Consortium	Brunswick	\$127,710
Cobb County Board of Health- Ryan White Consortium	Marietta	\$164,314
District 3 Ryan White Consortium	Lawrenceville	\$148,046
District 8-1 Ryan White Consortium	Valdosta	\$91,105
District Four Ryan White Consortium	LaGrange	\$126,896
East Central Georgia HIV/ AIDS Consortium	Augusta	\$479,928
Georgia Mountains AIDS Consortium	Gainesville	\$40,672
North and South Central Ryan White Consortia	Macon	\$230,203
Northeast Georgia HIV/AIDS Consortium	Athens	\$78,090
Northwest GA Interdisciplinary AIDS Task Force	Dalton	\$34,164
Northwest GA Unit 1 Ryan White AIDS Consortium	Rome	\$41,485
Ryan White II Consortium	Albany	\$366,047
Ryan White Title IV Pediatric Consortium	Atlanta	\$75,037
Savannah/Chatham AIDS Coalition	Savannah	\$357,912
Southeast Health Unit Summit on AIDS Care	Waycross	\$238,337
West Central Georgia AIDS Consortium	Columbus	\$309,919

Accomplishments

Clients Served (duplicated count), FY 1996:	4,030
Men:	65%
Women:	35%
<13 years old:	12%
13-19 years old:	2%
20+ years old:	86%
White:	31%
African American:	67%
Hispanic:	2%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%
Men who have sex with men (MSM):	33%
Injecting drug user (IDU):	10%
Men who have sex with men and inject drugs (MSM/IDU):	2%
Heterosexual contact:	45%
Other, unknown or not reported:	9%

► Improved Patient Access

- The number of clients receiving primary health care and services through HIV care consortia has increased approximately 330% over seven years, from 991 clients in FY 1991 to 4,290 as of December 1997.
- The total number of clients accessing ADAP increased 41% between 1995 and 1997, from 1,280 to 1,809 persons served. In January 1998, enrollment was capped at 1,221 as the maximum number of people who can be served at any given point in time. When individuals become eligible for Medicaid or leave ADAP for other reasons, new clients are enrolled. As of July 1998, there was a waiting list of 662 people.
- During 1997, Georgia's ADAP expanded the formulary to include all protease inhibitors, increased the number of persons to be maintained on the program from 1,015 to 1,221, revised the income guidelines from 125% FPL to 300% FPL, and provided triple combination therapy.

► Cost Savings

- The ADAP participates in the Office of Drug Pricing's discount drug purchasing program, for significant cost savings.

- The benefits coordinator monitors the re-certification process and routinely discusses with ADAP coordinators the requirement for Medicaid eligibility prior to re-certification.
- ▶ **Other Accomplishments**
- Title II co-sponsored a statewide three-day conference, “Cross-training” focusing on STD, HIV, TB, public health and substance abuse treatment. In 1997, the Title II program collaborated with other State Health Department programs to provide 24 cross-training sessions on HIV, STD, TB, and substance abuse to more than 1,100 health care professionals.
- The statewide Medical Providers Task Force is charged with making recommendations regarding the ADAP formulary, and eligibility criteria guidelines. Current membership of the Statewide Medical Providers Task Force includes physicians (pediatric and infectious disease) and PLWH. The Task Force normally meets quarterly or more often if needed.
- A clinical assessment of all Title I-, II-, and III-funded sites will be completed in FY 1998.

AIDS Drug Assistance Program (ADAP): Georgia

ADAPs provide medications to low-income PLWH with limited or no coverage from private insurance or Medicaid. ADAP is just one of multiple sources of public and private funding for HIV treatment, the largest source being Medicaid.

Funding History

Fiscal Year	1996	1997	1998	Total
Title II Funds	\$3,515,721	\$8,055,509	\$10,818,043	\$22,389,273
State Funds	\$324,450	\$324,450	\$1,200,000	\$1,848,900
Other: Title I	\$1,064,645	\$1,000,000	\$1,000,000	\$3,064,645
Total	\$4,904,816	\$9,379,959	\$13,018,043	\$27,302,818

Program

- ▶ Administrative Agency: Dept. of Human Svcs.
- ▶ Formulary: 11 drugs, 4 protease inhibitors, 8 other antiretroviral drugs.
- ▶ Medical Eligibility
 - ▶ HIV Infected: Yes
 - ▶ CD4 Count: Yes
- ▶ Financial Eligibility
 - ▶ Asset Limit: No
 - ▶ Annual Income Cap: Yes
- ▶ Co-payment: No
- ▶ PLWH involvement in advisory capacity: The Statewide Medical Providers Task Force, whose membership includes physicians and PLWH, meets quarterly to make recommendations regarding the ADAP formulary and eligibility criteria guidelines.
- ▶ Enrollment cap: 1,440
- ▶ Waiting list as of 10/98: 875
- ▶ Waiting list for protease inhibitors as of 10/98: No

Clients Served

Clients enrolled, 10/98:	1,440
Number using ADAP each month:	1,130
Percent of clients on protease inhibitors:	65%
Percent of active clients below 200% FPL:	97%

Client Profile, FY 1996

Men:	80%
Women:	20%

<13 years old:	0%
13-19 years old:	1%
20+ years old:	99%

White:	35%
African American:	63%
Hispanic:	1%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%

Title III: Georgia

Title III provides funding to public and private nonprofit entities for outpatient early intervention and primary care services. From FY 1991 to FY 1998, \$445.8 million was appropriated for Title III programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Number of Programs Funded in State	6	7	8	
Total Title III funding in State	\$2,372,254	\$2,797,122	\$2,980,472	\$8,149,848

Clients Served in FY 1996 by Title III Grantees in State

(Based on programmatic information from 6 grantee(s) in State)

- ▶ Total number of people provided HIV pre-test counseling and testing services by State's Title III-funded programs: 15,482
- ▶ Total number of people provided primary health care services by State's Title III-funded programs: 2,361
- ▶ Number of new HIV-infected patients enrolled in State's Title III-funded early intervention programs in the past year: 1,126
- ▶ New clients (adults only) in State's Title III-funded early intervention programs presenting with CD4:
 - ▶ under 200: 36%
 - ▶ from 200 to 499: 28%
 - ▶ above 500: 31%
 - ▶ unknown: 4%

Accomplishments

Clients served (primary care only), 1996:	2,361
Men:	66%
Women:	34%
<13 years old:	3%
13-19 years old:	2%
20+ years old:	95%

White:	27%
African American:	64%
Hispanic:	9%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%
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Men who have sex with men (MSM):	30%
Injecting drug user (IDU):	14%
Men who have sex with men and inject drugs (MSM/IDU):	2%
Hemophilia/coagulation disorder:	7%
Heterosexual contact:	41%
Receipt of blood transfusion, blood components, or tissue:	1%
Other, unknown or not reported:	6%

► **Improved Patient Access**

- The Medical College of Georgia is the only tertiary caregiver accepting indigent HIV clients outside of metro Atlanta. Between 1995 and 1997, the grantee enrolled 495 new clients in the program. More than 130 clients from South Carolina sought care through the Georgia-based program.
- The Southeast Health Unit established five HIV/AIDS Wellness Centers to serve a large rural area in Georgia where ability to access care is impacted by poverty, isolation, lack of practitioners, and inadequate public transportation. Of the clients served, only 11.5% have health insurance and 40.5% have no third party payment.
- Of the 467 clients served in FY 1997 by Albany Area Primary Health Care, 41% were women. In the same time period, the grantee established a pediatric clinic one-day per month. On average, ten pediatric clients were seen per clinic day in 1997.
- The total number of new clients at the Chatham County Board of Health increased by 30% between 1994 and 1996. In 1996, the program added a retinology clinic and, in 1997, a pulmonology clinic.

► **Improved Patient Outcomes**

- An analysis of the Medical College of Georgia's inpatient length of stay and cost documented decreases in the length of stay, average cost, and total number of HIV-infected clients hospitalized. Between July 1993 and July 1994, 126 hospitalizations were reported. This number decreased by 25% to 95 hospitalizations in FY 1997. The average length of stay decreased from 13.3 days in FY94 to 8.1 days in FY 1997.

- In November 1996, the grantee reviewed medical records covering an 11-month period at the Southeast Health Unit as part of a study conducted in collaboration with the Division of HIV/AIDS, National Center for Infectious Diseases. The results show that the Southeast Health Unit consistently provided clinical preventive medications, vaccines, and tests to the enrolled clients. Specific examples included: 1) 97% of women served received a Pap smear; 2) 95% of clients with a CD4 count less than 200 cells/mm³ received PCP prophylaxis; and 3) 90% of the clients received antiretroviral therapy at some point in the course of HIV disease.
- The Quality Improvement Committee of Albany Area Primary Health Care noted a reduction in the frequency of HIV-wasting syndrome.

► **Cost Savings**

- The Medical College of Georgia garnered more than \$400,000 in compassionate use drugs in 1997.
- The average cost of inpatient stays of clients enrolled in the Medical College of Georgia decreased from \$9,552 in FY 1994 to \$6,260 in FY 1997.
- Albany Area Primary Health Care negotiates with local pharmacies on an annual basis to maximize drug-discount rates. In 1997, medications were available to the program at the average wholesale prices minus 10%.

Title III Grantees, FY 1998

Grantee Name	Location	Service Area	Type of Organization
Albany Area Primary Health Care	Albany		Community and Migrant (329/330) Health Center
Chatham County Health Department	Savannah	Chatham and Effingham Counties	Health Department
Glynn County Board of Health	Brunswick	Glynn, Camden, McIntosh, Long, Liberty, and Bryan Counties	Health Department
Hemophilia of Georgia	Atlanta	Entire states of Georgia, Florida, Mississippi	Hemophilia Treatment Center
Medical College of Georgia	Augusta	Serves 62 of Georgia's 159 counties and over 100 clients in South Carolina	Hospital/University-based Medical Center
St. Joseph's Mercy Care/Mercy Mobile	Atlanta	Fulton and DeKalb Counties, City of Atlanta	Non-329/330/340 Health Center
Ware County Board of Health	Waycross	16 Counties	Health Department

Planning Grants

1998 - Lowndes City Board of Health - Valdosta

Title IV: Georgia

Title IV provides funding for the development and operation of family-centered systems of primary health care and social services for infants, children, youth, women, and mothers (including pregnant women) and also serves high-risk individuals affected by HIV due to their relationship to family members with HIV. From FY 1991 to FY 1998, \$241.5 million was appropriated for Title IV programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Number of Funded Programs	1	1	1	
Total Title IV Funding	\$513,940	\$520,940	\$537,000	\$1,571,880

HIV-Infected and Affected Clients Served in 1996 by Title IV Grantees in State

Pregnant adolescents and women:	3%
Women with children:	4%
Adolescents/young adults:	89%
Children:	1%
Infants:	0%
Clients with AIDS/HIV Infection:	13%

Accomplishments

All clients served, 1996:	679
Men:	30%
Women:	70%
(Adolescents and adults only)	

<13 years old:	1%
13-19 years old:	89%
20+ years old:	10%

White:	9%
African American:	85%
Hispanic:	5%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%

Men who have sex with men (MSM):	7%
Injecting drug user (IDU):	1%
Men who have sex with men and inject drugs (MSM/IDU):	1%
Hemophilia/coagulation disorder:	38%
Heterosexual contact, non IDU:	31%
Receipt of blood transfusion, blood components, or tissue:	5%
Pediatric Exposure:	9%
Other, unknown or not reported:	7%

► **Improved Patient Access**

- In 1997, Georgia's Title IV project served more than 1,600 clients. The grantee also enrolled more than 570 clients in clinical trials.
- To allow for the coordination of appointments during one visit, one of the provider agencies made co-located services available for women and children.
- The Grady Adolescent HIV Clinic, other at-risk clinics within the Grady Health System, and the Title IV network of providers provide ongoing client education to reduce perinatal HIV transmission. Pregnant youth are immediately linked to Grady's obstetrical service.
- Through Georgia's Title IV program, clients are offered support services, such as transportation and childcare, to facilitate access to care.
- Each quarter, approximately 580 at-risk Hispanics are provided preventive services, such as support groups, education, case management, and screening through Georgia's Title IV program.
- The Grady Obstetrics Department provides specialized appointments for pregnant women who are HIV-infected. A perinatal liaison nurse coordinates prenatal, postpartum, and long-term care for clinic participants and works with the Grady Infectious Diseases Program to facilitate transition during the postpartum period.

► **Improved Patient Outcomes**

- Until ZDV was routinely offered, the perinatal HIV transmission rate was 15 to 20% in the service area for Georgia's Title IV program. Since 1994, the transmission rate has decreased to 6.5%.
- An estimated 95% of the women receiving obstetrical care at Grady Health System agree to voluntary HIV testing.
- The consortium agencies are tracking the number and types of outreach encounters and the number of referrals made for HIV-infected pregnant women to assess the impact of the Title IV program.

► **Cost Savings**

- The Georgia Department of Medical Assistance, which supports approximately 55% of Georgia's newborn deliveries, has implemented a \$100-incentive program for physicians who secure pregnant women in care during the first trimester. This incentive program has been revised to include HIV counseling and testing as part of the standard of care.

Title IV Grantees, FY 1998

Grantee Name	Location	Service Area	Type of Organization
GA Dept. of Human Resources/Div. Of Public Health	Atlanta	Atlanta metropolitan area (8 counties)	Health Department

Special Programs of National Significance (SPNS): Georgia

The goal of the SPNS program is to advance knowledge about the care and treatment of persons living with HIV/AIDS by providing time-limited grants to assess models for delivering health and support services. From FY 1991 to FY 1998, \$119.9 million in funding was dedicated for SPNS programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Number of programs funded	2	2	2	
Total SPNS Funding in State	\$528,155	\$835,439	\$983,392	\$2,346,986

Project Descriptions

► Emory University

Location: Atlanta

Project period: 10/94 - 9/99

Population Served: Correctional health care providers

Description of Services: The Emory University project develops HIV/AIDS-related training and curricula for the Georgia Department of Corrections and its health care providers, including assessment of the training requirements of correctional health care providers, design and implementation of appropriate training models, and evaluation of their effectiveness. Specifically, the project measures the effectiveness of training in increasing provider knowledge and effecting attitudinal changes that improve HIV/AIDS care over time.

Project Highlights

- Project staff have assessed the training needs of correctional health care providers as well as the impact of Emory University training in a baseline review in 1995 and a mid-point review in 1997. Analysis shows that HIV care has improved in institutions where training has occurred, increasing participant knowledge and competency.
- The project conducted on-site interactive clinical teaching in eight Georgia prisons as well as statewide HIV training workshops for correctional health care providers.
- Because provider turnover in prisons is high, the project has developed strategies to ensure frequent training services and access to additional training resources.

- Emory University project staff have organized an HIV specialty care referral system and developed strategies to transfer clinical advances in HIV care to correctional health care professionals. Training topics most often needed by correctional providers include: pre- and post-test counseling, antiretroviral treatment, diagnosis and management of opportunistic infections, patient education and discharge planning, women's health, wasting and nutritional issues, and physical assessments. On-site training has been found to be the most effective method.

► **Outreach, Inc.**

Location: Atlanta

Project period: 10/94 - 9/99

Population Served: HIV-infected African-American substance users

Description of Services: Safe Place targets substance-abusing, HIV-positive residents of local housing projects and correctional facilities and encourages them to enter and remain in care. Data show that when clients first enter the program, only 14% have their own place to live. Eighty-five percent have been involved in the criminal justice system, and 99% have a history of substance abuse. This population also experiences a multitude of other barriers to care, which Safe Place seeks to overcome. Innovations include establishment of a broad services network tied to a drop-in center or satellite facility in a downtown African American neighborhood. Safe Place trains and employs peer counselors and other indigenous staff, many of whom are HIV-positive and recovering substance abusers themselves. The program offers transportation to and from appointments with medical, substance abuse, and social service providers. Safe Place also brings services as well as training programs directly into hard-to-reach communities to reduce barriers to care.

Project Highlights

- Safe Place has been successful in developing model outreach programs for active substance users--largely heroin and alcohol--in the University Homes, John Hope Homes, and Herndon Homes housing projects in Atlanta, the Fulton County Jail, and the Atlanta City Detention Center.
- Safe Place has opened a neighborhood drop-in center to increase client access to services and provide HIV-positive substance abusers and sex workers with individual and group counseling, even if they are not in substance abuse treatment.
- Project staff have provided services to 1,200 persons since the opening of the satellite center, of whom 98% were African American, 2% White, and 0.1% Hispanic. Clients were successfully referred for HIV testing, medical care, and substance abuse treatment. The project has also provided transportation services to 513 clients, involving more than 5,000 visits to service providers.
- The project has established an effective services network that includes more than 50 medical care, substance abuse treatment, women-specific interventions, and mental health service agencies.
- Safe Place has successfully established a counseling and education program with local correctional facilities to provide support services to HIV-positive prisoners, and, upon release, help them make the transition into community health care and substance abuse treatment programs.

AIDS Education and Training Centers: Georgia

The AETCs are a network of 15 regional education centers (75 local performance sites covering all 50 states, Washington, D.C., Puerto Rico, and the Virgin Islands) funded by the CARE Act to train clinical health care providers, provide consultation and technical assistance and disseminate rapidly changing information for the effective management of HIV infection. Targeted providers are CARE Act-funded programs, federally funded community migrant health centers, and clinicians serving persons living with HIV infection. From FY 1991 to FY 1998, \$171 million was appropriated for AETC programs in the U.S.

- ▶ Southeast AETC
- ▶ States Served: Alabama, Georgia, North Carolina, South Carolina
- ▶ Primary Grantee: Emory University, School of Medicine, Atlanta, GA
- ▶ Subcontractors in State: Clark University, Department of Sociology - Atlanta

Funding History

Year	1996	1997	1998	Total
Total AETC				
Funding for State	\$487,679	\$622,737	\$652,369	\$1,762,785

Training Highlights from FY 1997

- From July 1997 to June 1998, the AETC offered 84 events to the staff at CARE Act-funded agencies. For example, the AETC developed and managed the first residency experience for Emory University's Family and Preventive Medicine Department on ambulatory management of adult HIV patients. Ten residents received an average of 24 hours of instruction including four hours on patient education and four hours on dental care. The North Carolina performance site collaborated with a SPNS program in the State to provide four hours of training to 23 physicians, midlevel clinicians, mental health providers, hospital workers, and health department workers on the medical management of HIV, with an emphasis on the use of consulting physicians. The performance site at Clark University in Atlanta conducted a semester-long course (42 hours) for graduate students in the University's School of Social Work. The South Carolina performance site and the University of South Carolina School of Medicine collaborated to train nurse practitioners and physicians on the medical management of HIV-infected children. The Alabama performance site provided a course titled "STD/HIV Prevention Through Behavior Modification" two times. The 9.5-hour course was attended by 44 care providers.
- The AETC developed and mailed a resource kit on prenatal HIV testing to 7,789 OB/GYN and family practice physicians and 471 certified nurse-midwives in the region. The kit contained a waiting room poster to encourage prenatal HIV testing and a booklet with consent forms, counseling checklists, and other material to enhance HIV counseling of prenatal patients.

- The South Carolina performance site offered a six-hour training for 22 care providers from health care clinics, drug treatment programs, AIDS service organizations, and minority outreach programs. The goal of the training was to educate participants about appropriate evaluation methodologies for assessing HIV prevention programs.
- The North Carolina performance site offered a seven-hour training to 67 clinical care providers, counselors, case managers, and social workers designed to help participants identify elements of cross-cultural healing, beliefs about illness and disease, cultural world views, and their implications for delivering effective and compassionate care to persons with HIV.

HIV/AIDS Dental Reimbursement Program: Georgia

The CARE Act HIV/AIDS Dental Reimbursement Program reimburses eligible dental schools and postdoctoral dental education programs for the reported, uncompensated costs of providing oral health care to PLWH. From FY 1996 (when the program was first funded by the CARE Act) to FY 1998, \$22.2 million in funding was provided for programs in the U.S.

Funding History

Year	1996	1997	1998	Total
Number of Programs Funded in State	1	1	1	
Total HIV/AIDS Dental Reimbursement Program Funding in State	\$27,993	\$37,220	\$48,058	\$113,271

Accomplishments

Est. clients served, 1996:	287
Men:	87%
Women:	13%

HIV/AIDS Dental Reimbursement Program Grantees, FY 1998

Grantee Name	Location
Medical College of Georgia	Augusta